STATE OF SOUTH CAROLINA COUNTY OF BERKELEY

PROBATE COURT

IN THE MATTER OF

CASE NUMBER

INVENTORY AND APPRAISEMENT

	ORIGINAL
	ORIGINAL SUPPLEMENTAL #
Conservator: Protected Person's Social Security The undersigned being sw	Number: orn, states: That the following schedules contain a complete
and accurate inventory and apprai as the undersigned is informed; that	sement of all real and personal property of this estate so far it he/she has estimated and appraised all listed property at its best of his/her knowledge and ability.
Copies of this inventory have	re been sent to the following persons.*
SWORN to before me this	
day of	Signature: Name: Address:
	Telephone (O) (H):
Notary Public for South Carolina My Commission Expires:	

The gross fair market valuation of all assets, regardless of situs, should be given as of the date of appointment. List all out-of-state assets on appropriate schedules. A Supplemental Inventory should be utilized for correcting, adjusting or adding to an original inventory.

The type and amount of any encumbrances that may exist with reference to any item should be disclosed.

Case Number:

RECAPITULATION

			Out-of-state	In-state
Sched Sched Sched Pari Sched Sched Sched Sched	ule A - Real Estate	Cash	·	
TOTA TOTA	L GROSS VALUE ENCUMBRANCES L NET WORTH		.\$) \$	\$) () \$
Probat	*Within thirty (30) days follow be sent to each interested per te Court. A copy must also be 14 years, and to any parent o	son who requests it, a e provided to the protec	nd the original in ted person, if he	nventory filed with the e/she has attained the
LIST A	: WHEN COMPLETING THI ALL ASSETS, REGARDLES OSED.			
	DULE A - Real Estate (All intership) (If none, so state.)	erest in real property e	xcept those held	with right of
	(For jointly owned property w	vith right of survivorship	o, see schedule	Ε)
Item No	Description	Tax Assessor's Fair Market Value for year of Appointment	Appraise Value	Appraised Value of Protected ed Person's Interest
	L SCHEDULE A enter under recapitulation abo	ve)	\$	

Case Number: SCHEDULE B - Stocks and Bonds (If none, so state.) (For jointly owned property with right of survivorship, see schedule E)			
Item No.	Description	Face Value	Appraised Value
TOTAL SCHE (also enter une	DULE B der recapitulation, page 2)	\$	
	- Mortgages, Notes and Ca intly owned property with right	,	nedule E)
Item No.	Description		Value
TOTAL SCHE		\$.	
(also enter un	der recapitulation, page 2)		
(If more space	e is required, insert tax schedu	ules or additional sheets	of same size.)
SCHEDULE D) - Insurance (If none, so state	e.)	
Part 1 - Life In	surance Payable to the Estate	е	
Item No.	Description		Value
TOTAL PART (also enter une	1 der recapitulation, page 2)	\$	

Case Number: Part 2 - Life Ins	surance Payable to Beneficia	ries	
Item No.	Description		Value
TOTAL PART :	2 ler recapitulation, page 2)		\$
	- Jointly owned Property (ve, so state.)	with right of survivorship)	
Item No.	Description	Percentage Includible	Appraised Value of Protected Person's Interest
TOTAL SCHEI (also enter und	DULE E ler recapitulation, page 2)		\$
(If more space	is required, insert tax schedu	ules or additional sheets of	same size.)
bonus or awar having either a	- Miscellaneous Personal rd, interest in a partnership rtistic or intrinsic value, etc.) rship, see schedule E.)	or unincorporated busine	ess, articles or collections
Item No.	Description		Value
TOTAL SCHEI	DULE F ler recapitulation, page 2)		\$

United States Gover prior to incapacity in ownership retained,	ansfers Prior to Incapacity (Transfers intended in ment Bonds "Payable on Death", Trust created by which income for life was retained, Power to revolute insurance transfers, Lifetime transfers of a retains a life estate or other incidents of ownership	y Incapacitated Person ke or other incidents of real property in which
Item No.	Description	Value
TOTAL SCHEDULE (also enter under rec		\$
(If more space is req	uired, insert tax schedules or additional sheets of sa	ame size.)
	owers of Appointment (Property, both real and possessed a Power of Appointment, whether Test	•
Item No.	Description	Value
TOTAL SCHEDULE (also enter under rec		\$
SCHEDULE I - Annu	nities (IRA's, Keogh's, etc.) (If none, so state.)	
Item No.	Description	Value

(If more space is required, insert tax schedules or additional sheets of same size.)

TOTAL SCHEDULE I

(also enter under recapitulation, page 2)

Case Number: ENCUMBRANCES			
Item No.	Schedule & Item Number	Description & Amount	Encumbered Thereby

TOTAL ENCUMBRANCES (also enter under recapitulation, page 2)

S_____

(If more space is required, insert tax schedules or additional sheets of same size.)